neurology C service of the Hospitalar and Universitary Center of Coimbra by all the support and availability showed during this study.

References

- Belafsky PC, Mouadeb DA, Rees CJ, Pryor JC, Postma GN, Allen J, Leonard RJ. Validity and Reliability of the Eating Assessment Toll (EAT-10). Ann Otol Rhinol Laryngol. 2008;117(12):919-924.
- Clavé P, Arreola V, Romea M, Medina L, Palomera E, Prat MS. Accuracy of the volume - viscosity swallow test for clinical screening of oropharyngeal dysphagia and aspiration. Clin Nutr. 2008 Dec;27(6):806-815.
- Nogueira DS, Ferreira PS, Reis EA, Lopes IS. Measuring Outcomes for Dysphagia: Validity and Reliability of the European Portuguese Eating Assessment Tool (P-EAT-10). Dysphagia. 2015;30(5):511-520.

Keywords

Deglution disorders, Bedside examination, Dysphagia, Aspiration.

P44

Strategies to improve hand hygiene practices: an integrative literature review

Ana C Mestre, Filipa Veludo, Susana Freitas

School of Nursing, Institute of Health Sciences, Universidade Católica Portuguesa, 1649-023 Lisbon, Portugal

Correspondence: Ana C Mestre (catarina-mestre@hotmail.com) BMC Health Services Research 2018, **18(Suppl 2):**P44

Background

Healthcare-associated infections (HAIs) are a global concern and pose a real threat to patient safety. Many of them preventable [1]. Knowing that hands of healthcare professionals are one of the main vehicles in the transmission of microorganisms, hand hygiene (HH) is recognized as the easier and most effective measure to prevent and reduce HAIs [2]. However, despite all evidence available and although 98% of healthcare professionals consider HH as the most important basic precaution in preventing HAIs, compliance is poor, remaining less than 40% [3,4].

Objective

To identify, in Literature, the most effective strategies to promote HH compliance.

Methods

An integrative review between September and October 2017 was fulfilled with the Boolean strategy: [(TI Title) hand hygiene AND (AB Abstract) nurse AND (AB Abstract) infection AND (AB Abstract) strategy OR compliance OR adherence] in CINAHL[®], Science Direct and Academic Search Complete. A total of 396 articles were identified, initially. After applying the inclusion criteria: primary and secondary studies with a qualitative and quantitative approach available in full text in Portuguese, English, French and Spanish; and exclusion criteria: studies published before 2016, a sample of 12 articles was included for analysis. **Results**

From a total of 12 articles analysed, 10 showed the importance of a multimodal approach to the improvement of HH practices with consequent increase in compliance to this behaviour. It stands out the combination of interventions addressing knowledge (education), awareness, context of action (reminders in the workplace) as well as the involvement and support of leaders and managers in building an institutional safety culture (social influence) as the most effective to ensure greater compliance to HH.

Conclusions

In order to improve HH practices and, consequently, adherence to this behaviour, the adoption of a multimodal strategy proved to be more successful when compared to single interventions. At an early stage, it is essential to understand the reasons that lead to non-adherence to HH and after that design interventions based on identified barriers. The approach should be global, including not only healthcare professionals but also leaders and managers.

References

- WORLD HEALTH ORGANIZATION. WHO Guidelines on Hand Hygiene in Health Care. 2009. Accessed 20-11-2017. Available in http://apps.who.int/ iris/bitstream/10665/44102/1/9789241597906_eng.pdf
- DIREÇÃO-GERAL DA SAÚDE- Circular Normativa nº 13/DQS/DSD de 14/ 06/2010 (2010). Orientação de Boa Prática para a Higiene das Mãos nas Unidades de Saúde. Lisboa: Direção Geral de Saúde. Acccessed 20-11-2017. Available in: https://www.dgs.pt/directrizes-da-dgs/normas-e-circulares-normativas/circular-normativa-n-13dqsdsd-de-14062010.aspx
- Piras SE, Lauderdale J, Minnick A. An elicitation study of critical care nurses' salient hand hygiene beliefs. Intensive and Critical Care Nursing. 2017;42:10–16.
- Farhoudi F, Sanaei Dashti A, Hoshangi Davani M, Ghalebi N, Sajadi G, Taghizadeh R. Impact of WHO Hand Hygiene Improvement Program Implementation: A Quasi-Experimental Trial. Biomed Res Int. 2016;2016:7026169.

Keywords

Hand hygiene, Healthcare-associated infections, Multimodal strategy, Integrative literature review.

P45

Conception and implementation of a nursing intervention program for family caregivers

Ricardo Melo^{1,2}, Marília Rua², Célia Santos³ ¹Centro Hospitalar de Gaia/Espinho, 4400-129 Gaia, Portugal; ²Escola Superior de Saúde, Universidade de Aveiro, 3810-193 Aveiro, Portugal; ³Escola Superior de Enfermagem do Porto, 4200-072 Porto, Portugal **Correspondence:** Ricardo Melo (rmcmelo@hotmail.com) *BMC Health Services Research* 2018, **18(Suppl 2):**P45

Background

The increase of longevity of people and prevalence of diseases resulting in situations of dependency [1], emerge a greater need for supportive care to meet the needs expressed [2]. Family caregivers are very important elements in caring for the family member with self-care dependency, at the home context [3, 4]. This is an exhausting process with serious consequences for the general state of health perceived by the caregiver, as well as for the manifested burden [3, 5, 6]. A structured and contextualized intervention program [7] aimed at the qualification and support of family caregivers is essential for the transition and adequate performance of the functions inherent in this role. **Objective**

To develop and implement a Nursing Intervention Program with family caregivers of dependent persons, in a home context.

Methods

This process began with an integrative review of the literature, in order to discover the main needs evidenced by family caregivers. Electronic databases were used, namely EBSCO and B-on, with the following descriptors: Caregiver; Family Caregivers; Needs; Dependent. The second stage corresponded to the adaptation of the Intervention Program, with the use of the Delphi technique on a group of experts. The last phase corresponded to a quasi-experimental study, with pre- and post-intervention evaluation, with the implementation of the program on 70 family caregivers, using home visits.

Results

With the review of the literature were obtained 21 articles (ten quantitative studies, five qualitative studies, four systematic reviews of the literature, a review of the literature and a mixed study). The evidenced needs were organized by the Transition Theory: community and social resources; knowledge and preparation; personal meaning, beliefs and attitudes; and socioeconomic condition. The consensus technique allowed the structuring of a Nursing Intervention Program, with 93 interventions, divided in emotional and instrumental support. The implementation of the Intervention Program implied, on average, 6 home visits to the caregivers, emotional support provision and caregiver training.